

Application No. (if known): 10/584,366

Attorney Docket No.: 65814(46590)

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Part B- Fee Transmittal (Form PTOL-85) (1 page )

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PTO/SB/21 (01-08)

Approved for use through 03/31/2008. OMB 0651-0031
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## TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/584,366-Conf. #9498 Filing Date June 23, 2006 First Named Inventor Akira Horinouchi Art Unit 1797 **Examiner Name** M. Wallenhorst Attorney Docket Number 65814(46590)

ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final **Proprietary Information Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please X Other End. Extension of Time Request Terminal Disclaimer Certificate of Express Mailing (1 page) **Express Abandonment Request** Request for Refund Part B - Fee Transmittal (Form PTOL-85) (1 page) Information Disclosure Statement CD, Number of CD(s) Return Receipt Postcard Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name EDWARDS ANGELL PALMER & DODGE LLP Signature Printed name Kathryn A. Piffat, Ph.D., Es Date Reg. No. May 12, 2008 34,901

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| Dated: May 12, 2008                    | Signature: (Alma, I. Woodhern)   |    |

PTO/SB/17 (10-07)

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| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  |                               |                                 |  | Complete if Known                   |                |                          |                              |  |  |
|  |                               |                                 |  |                                     |                | 10/584,366-Conf. #9498   |                              |  |  |
| FEE TRANSMITTAL  |                               |                                 | 9 = ===                                      |                                     | June 23, 2006  |                          |                              |  |  |
| For FY 2008  |                               |                                 | First Named Inventor Akira Horino            |                                     | M. Wallenhorst |                          |                              |  |  |
|  |                               |                                 | 49   |                                     |                |                          |                              |  |  |
| Applicant claims small entity status. See 37 CFR 1.27  |                               |                                 | Art Unit 1797                                |                                     |                |                          |                              |  |  |
| TOTAL AMOUNT OF PAYMENT  | (                             | \$) 1,743.00                    | <u>)                                    </u> | Attomey Docket                      | No.            | 65814(46590)             |                              |  |  |
| METHOD OF PAYMENT  | (check all th                 | at apply)                       |  |                                     |                |                          |                              |  |  |
| Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP   |                               |                                 |  |                                     |                |                          |                              |  |  |
| For the above-identific  |                               |                                 | rector is                                    | hereby authorize                    | d to: (che     | ck all that apply)       |                              |  |  |
| x Charge fee(s) in   |                               |                                 |  | $\overline{}$                       | -              |                          | cept for the filing fee      |  |  |
| X Charge any add fee(s) under 37   | litional fee(s                | ) or underpayr                  | ments of                                     |                                     | any overp      |                          |                              |  |  |
| FEE CALCULATION  |                               |                                 |  |                                     |                | •                        |                              |  |  |
| 1. BASIC FILING, SEARCH,   | AND EXAM                      | NATION FEE                      | S  |                                     |                |                          |                              |  |  |
|  |                               | FEES                            | SEA  | ARCH FEES                           | EXAM           | NATION FEES              |                              |  |  |
| Application Type   | Fee (\$)                      | Small Entity<br>Fee (\$)        | Fee (\$                                      | Small Entity ) Fee (\$)             | Fee (\$)       | Small Entity<br>Fee (\$) | Fees Paid (\$)               |  |  |
| Utility  | 310                           | 155                             | 510  | 255                                 | 210            | 105                      |                              |  |  |
| Design   | 210                           | 105                             | 100  | 50                                  | 130            | 65                       | -                            |  |  |
| Plant  | 210                           | 105                             | 310  | 155                                 | 160            | 80                       |                              |  |  |
| Reissue  | 310                           | 155                             | 510  | 255                                 | 620            | 310                      |                              |  |  |
| Provisional  | 210                           | 105                             | 0  | 0                                   | 0              | 0                        |                              |  |  |
| 2. EXCESS CLAIM FEES   |                               |                                 |  |                                     |                |                          | Small Entity                 |  |  |
| Fee Description  |                               |                                 |  |                                     |                |                          | Fee (\$) Fee (\$)            |  |  |
| Each claim over 20 (includin   | -                             | - D-i)                          |  |                                     |                |                          | 50 25                        |  |  |
| Each independent claim over Multiple dependent claims  | 3 (includin                   | g Keissues)                     |  |                                     |                |                          | 210 105<br>370 185           |  |  |
|  | laima E                       | aa ( <b>6</b> )                 | Eoo i  | Paid (\$)                           | N.             | Multiple Depende         |                              |  |  |
| <u>Total Claims</u> <u>Extra Claims</u><br>15 - 20 =   |                               | ee (\$)                         | 1001   | aid (v)                             |                |                          | Fee Paid (\$)                |  |  |
| HP = highest number of total claim   |                               |                                 |  |                                     | i.e            | 25.141                   | 14.                          |  |  |
| Indep. Claims Extra C  | laims F                       | ee (\$)                         | Fee [  | Paid (\$)                           |                |                          |                              |  |  |
| 4 =  |                               |                                 |  |                                     |                |                          |                              |  |  |
| HP = highest number of independe   | ent claims paid               | for, if greater than            | n 3.   |                                     |                |                          |                              |  |  |
| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                               |                                 |  |                                     |                |                          |                              |  |  |
| <u>Total Sheets</u> - 100 =  | ra Sheets                     |                                 |  | additional 50 or fra                |                |                          | <u>Fee Paid (\$)</u><br>=    |  |  |
| 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)   |                               |                                 |  |                                     |                |                          |                              |  |  |
| Other (e.g., late filing surcharge): 1501 Utility issue fee 1,440.00 1504 Publication fee for early, voluntary, or normal 300.00 8001 Printed copy of patent w/o color 3.00  |                               |                                 |  |                                     |                |                          |                              |  |  |
| SUBMITTED BY   |                               | 200                             |  |                                     |                |                          |                              |  |  |
| Signature Signature  | you a                         | t-11.                           | Shi  | Registration No.<br>(Attomey/Agent) | 34,901         | Telephone                | (617) 517-5516               |  |  |
| Name (Print/Type) Kathryn A.   | Piffat, Ph.                   | D., E\$                         | 7*   |                                     |                | Date                     | May 12, 2008                 |  |  |
| I hereby certify that this paper (   | along with an                 | unaner referred                 | to as bai                                    | no attached or each                 | need) ie boi   | ing denosited with **    | ne II S. Postal Service on   |  |  |
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| Dated: May 12, 2008  | Signature:                    | Mon                             | ンリー  | 1 mondes                            | (Alma J. V     | Voodberry)               |                              |  |  |